	·	Effect	שח		10/5	5//	170	<i>?</i>				
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
(Column 1) (Column 2)									<b>∷</b>	OR	SMALL	
TOTAL CLAIMS			10				RAT	RATE		7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE \$375		OR	BASIC FEE	\$750
TO	TAL CHARGE	ABLE CLÁIMS	/2 minus 20=		* .		X\$ 9	)=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*	7	X42				X84=	:
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESENT					_		OR		
* 11	the difference	e in column 1 is	less than zero, enter "0" ir			solumn 2	+140			OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	YL		OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								1 6	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS	1177	HIGH	EST.	(Column 3)	O III AL		ADDI-		OMALL	ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RATI	Ε	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	= ^		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>	X42=			OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						+140	=		OR	+280=	
								AL EE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)									•	.' .'	<del></del>
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	-		OR	X\$18=	
	Independent	*	Minus	***		=	X42=	1		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	╅				
•							+140= TOT			OR	+280= TOTAL	
			ADDIT. FI			OR ,	ADDIT. FEE					
_		(Column 1) CLAIMS		(Colum		(Column 3)				_		
AMENDMENT C	医特殊激素的激素	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X\$ 9=			OR	X\$18=	
	Independent	*	Minus `	***		=	X42=	╁		Ì	X84=	•
٩	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		A42=	+		OR	A04=	· · · · · · · · · · · · · · · · · · ·
* If the entry in column 1 is lose than the cate is called a 2 to 100 to										OR	+280=	
***	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

**Application or Docket Number**